

STATEMENT OF ECONOMIC INTERESTS
FAIR POLITICAL PRACTICES COMMISSION
COVER PAGECITY CLERK
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Please type or print in ink.

2013 APR 22 AM 11:57

NAME OF FILER

(LAST)

(FIRST)

(MIDDLE)

Friedman

Laura

1. Office, Agency, or Court

Agency Name

Glendale City Council

Division, Board, Department, District, if applicable

Your Position

Council Member

► If filing for multiple positions, list below or on an attachment.

Agency: Metropolitan Water District of Southern California

Position: Board Member

2. Jurisdiction of Office (Check at least one box)

☐ State☒ Multi-County Metropolitan Water District of Southern CA☒ City of Glendale☐ Judge or Court Commissioner (Statewide Jurisdiction)☒ County of Los Angeles☐ Other

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2012, through December 31, 2012.

-or-

The period covered is ____/____/____, through December 31, 2012.

☐ Leaving Office: Date Left ____/____/____
(Check one)☐ The period covered is January 1, 2012, through the date of leaving office.☐ The period covered is ____/____/____, through the date of leaving office.☐ Assuming Office: Date assumed ____/____/____☐ Candidate: Election year ____ and office sought, if different than Part 1: ____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 8

☒ Schedule A-1 - Investments - schedule attached☒ Schedule A-2 - Investments - schedule attached☐ Schedule B - Real Property - schedule attached☐ Schedule C - Income, Loans, & Business Positions - schedule attached☒ Schedule D - Income - Gifts - schedule attached☒ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

5. Verification

Date Signed

2/1/13

(month, day, year)

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Laura Friedman

1. BUSINESS ENTITY OR TRUST

PlanetGlass.net

Name

300 Brockmont Dr., Glendale CA 91202

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

website

FAIR MARKET VALUE

- ☐ \$0 - \$1,999
☐ \$2,000 - \$10,000
☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/12 ____/____/12
ACQUIRED DISPOSED

NATURE OF INVESTMENT

☐ Partnership ☒ Sole Proprietorship ☐ Other

YOUR BUSINESS POSITION owner/operator

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

- ☐ \$0 - \$499 ☒ \$10,001 - \$100,000
☐ \$500 - \$1,000 ☐ OVER \$100,000
☐ \$1,001 - \$10,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary).

☐ None

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT ☐ REAL PROPERTY

Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/12 ____/____/12
ACQUIRED DISPOSED

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership

☐ Leasehold ☐ Other

Yrs. remaining

☐ Check box if additional schedules reporting investments or real property are attached

1. BUSINESS ENTITY OR TRUST

Picture This Land

Name

300 Brockmont Dr., Glendale CA 91202

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

Landscape Design Firm

FAIR MARKET VALUE

- ☐ \$0 - \$1,999
☐ \$2,000 - \$10,000
☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/12 ____/____/12
ACQUIRED DISPOSED

NATURE OF INVESTMENT

☐ Partnership ☒ Sole Proprietorship ☐ Other

YOUR BUSINESS POSITION spouse of owner

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

- ☐ \$0 - \$499 ☒ \$10,001 - \$100,000
☐ \$500 - \$1,000 ☐ OVER \$100,000
☐ \$1,001 - \$10,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary).

☐ None

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT ☐ REAL PROPERTY

Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/12 ____/____/12
ACQUIRED DISPOSED

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership

☐ Leasehold ☐ Other

Yrs. remaining

☐ Check box if additional schedules reporting investments or real property are attached

Comments:

SCHEDULE A-1**Investments****Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Laura Friedman

▶ NAME OF BUSINESS ENTITY

Amgen

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

Pharmaceutical Manufacture

FAIR MARKET VALUE

- ☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

- ☒ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____/____/12 ____/____/12
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

Hologic Inc.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

Pharmaceutical Manufacture

FAIR MARKET VALUE

- ☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

- ☒ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____/____/12 ____/____/12
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

International Business Machines Corp

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

Technology

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000 ☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

- ☒ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____/____/12 ____/____/12
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

Procter & Gamble

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

Home Goods

FAIR MARKET VALUE

- ☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

- ☒ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____/____/12 ____/____/12
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

Bank of America

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

Banking

FAIR MARKET VALUE

- ☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

- ☒ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____/____/12 ____/____/12
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

Capital World Growth

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

Income Fund

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000 ☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

- ☐ Stock ☒ Other Mutual Fund _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____/____/12 ____/____/12
 ACQUIRED DISPOSED

Comments:

SCHEDULE A-1**Investments****Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Laura Friedman

▶ NAME OF BUSINESS ENTITY

Pfizer Inc.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

Pharmaceutical Manufacture

FAIR MARKET VALUE

- ☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

- ☒ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
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IF APPLICABLE, LIST DATE:

____/____/12 ____/____/12
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

Washington Mutual Investors

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000 ☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

- ☒ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____/____/12 ____/____/12
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

Genomic Health Inc Com

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

Pharmaceutical Manufacture

FAIR MARKET VALUE

- ☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

- ☒ Stock ☐ Other _____ (Describe)
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IF APPLICABLE, LIST DATE:

____/____/12 ____/____/12
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
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NATURE OF INVESTMENT

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GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

- ☐ Stock ☐ Other _____ (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____/____/12 ____/____/12
 ACQUIRED DISPOSED

Comments:

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	
Name <u>Laura Friedman</u>	

SCHEDULE D

Income – Gifts

<p>► NAME OF SOURCE (Not an Acronym) <u>Ken Spiker</u></p> <p>ADDRESS (Business Address Acceptable) <u>100 S. Flower St., Los Angeles CA 90015</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Consultant</u></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;">DATE (mm/dd/yy)</th> <th style="width: 15%;">VALUE</th> <th style="width: 65%;">DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>2 / 3 / 12</u></td> <td style="text-align: right;"><u>\$ 65</u></td> <td><u>Dinner - ICA Conference</u></td> </tr> <tr> <td><u> / / </u></td> <td style="text-align: right;"><u>\$</u></td> <td><u> </u></td> </tr> <tr> <td><u> / / </u></td> <td style="text-align: right;"><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>2 / 3 / 12</u>	<u>\$ 65</u>	<u>Dinner - ICA Conference</u>	<u> / / </u>	<u>\$</u>	<u> </u>	<u> / / </u>	<u>\$</u>	<u> </u>	<p>► NAME OF SOURCE (Not an Acronym) <u>Quick Pay Corp</u></p> <p>ADDRESS (Business Address Acceptable) <u>770 Menlo Ave., Menlo Park, CA 94025</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Parking Meter Manufacturer</u></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;">DATE (mm/dd/yy)</th> <th style="width: 15%;">VALUE</th> <th style="width: 65%;">DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>9 / 6 / 12</u></td> <td style="text-align: right;"><u>\$ 380</u></td> <td><u>Raffle Prize at CA</u></td> </tr> <tr> <td><u> / / </u></td> <td style="text-align: right;"><u>\$</u></td> <td><u>League of Cities</u></td> </tr> <tr> <td><u> / / </u></td> <td style="text-align: right;"><u>\$</u></td> <td><u>Conference - TV Set</u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>9 / 6 / 12</u>	<u>\$ 380</u>	<u>Raffle Prize at CA</u>	<u> / / </u>	<u>\$</u>	<u>League of Cities</u>	<u> / / </u>	<u>\$</u>	<u>Conference - TV Set</u>
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<p>► NAME OF SOURCE (Not an Acronym) <u>Los Angeles Business Council</u></p> <p>ADDRESS (Business Address Acceptable) <u>2029 Century Park E., Los Angeles CA 90067</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>501 C-3 non-profit</u></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;">DATE (mm/dd/yy)</th> <th style="width: 15%;">VALUE</th> <th style="width: 65%;">DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>3 / 5 / 12</u></td> <td style="text-align: right;"><u>\$ 95</u></td> <td><u>Dinner at Access DC</u></td> </tr> <tr> <td><u>3 / 7 / 12</u></td> <td style="text-align: right;"><u>\$ 65</u></td> <td><u>Lunch at Access DC</u></td> </tr> <tr> <td><u> / / </u></td> <td style="text-align: right;"><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>3 / 5 / 12</u>	<u>\$ 95</u>	<u>Dinner at Access DC</u>	<u>3 / 7 / 12</u>	<u>\$ 65</u>	<u>Lunch at Access DC</u>	<u> / / </u>	<u>\$</u>	<u> </u>	<p>► NAME OF SOURCE (Not an Acronym) <u>Nationwide Environmental Services</u></p> <p>ADDRESS (Business Address Acceptable) <u>11914 Front St., Norwalk CA 90650</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Consultant</u></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;">DATE (mm/dd/yy)</th> <th style="width: 15%;">VALUE</th> <th style="width: 65%;">DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>7 / 14 / 12</u></td> <td style="text-align: right;"><u>\$ 70</u></td> <td><u>Raffle Prize at ICA</u></td> </tr> <tr> <td><u> / / </u></td> <td style="text-align: right;"><u>\$</u></td> <td><u>Conference - DVD</u></td> </tr> <tr> <td><u> / / </u></td> <td style="text-align: right;"><u>\$</u></td> <td><u>player</u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>7 / 14 / 12</u>	<u>\$ 70</u>	<u>Raffle Prize at ICA</u>	<u> / / </u>	<u>\$</u>	<u>Conference - DVD</u>	<u> / / </u>	<u>\$</u>	<u>player</u>
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<u> / / </u>	<u>\$</u>	<u>player</u>																							
<p>► NAME OF SOURCE (Not an Acronym) <u>Pacific BMW</u></p> <p>ADDRESS (Business Address Acceptable) <u>800 S. Brand Blvd., Glendale CA 91204</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Auto Dealership</u></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;">DATE (mm/dd/yy)</th> <th style="width: 15%;">VALUE</th> <th style="width: 65%;">DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>9 / 8 / 12</u></td> <td style="text-align: right;"><u>\$ 70</u></td> <td><u>Ticket to Ascentia</u></td> </tr> <tr> <td><u> / / </u></td> <td style="text-align: right;"><u>\$</u></td> <td><u>Fundraiser</u></td> </tr> <tr> <td><u> / / </u></td> <td style="text-align: right;"><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>9 / 8 / 12</u>	<u>\$ 70</u>	<u>Ticket to Ascentia</u>	<u> / / </u>	<u>\$</u>	<u>Fundraiser</u>	<u> / / </u>	<u>\$</u>	<u> </u>	<p>► NAME OF SOURCE (Not an Acronym) <u>Meyers Nave</u></p> <p>ADDRESS (Business Address Acceptable) <u>555 Capitol Mall, Sacramento CA 95814</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Law Firm</u></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;">DATE (mm/dd/yy)</th> <th style="width: 15%;">VALUE</th> <th style="width: 65%;">DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>9 / 6 / 12</u></td> <td style="text-align: right;"><u>\$ 130</u></td> <td><u>Dinner for 2 at League</u></td> </tr> <tr> <td><u> / / </u></td> <td style="text-align: right;"><u>\$</u></td> <td><u>of California Cities</u></td> </tr> <tr> <td><u> / / </u></td> <td style="text-align: right;"><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>9 / 6 / 12</u>	<u>\$ 130</u>	<u>Dinner for 2 at League</u>	<u> / / </u>	<u>\$</u>	<u>of California Cities</u>	<u> / / </u>	<u>\$</u>	<u> </u>
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<u> / / </u>	<u>\$</u>	<u> </u>																							

Comments: _____

SCHEDULE D
Income – Gifts

► NAME OF SOURCE (Not an Acronym)
Library Systems Services
 ADDRESS (Business Address Acceptable)
12850 Middlebrook Rd., Germantown MD
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Consultant

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>9 / 11 / 12</u>	<u>\$ 225</u>	<u>Raffle Prize at CA</u>
<u> / / </u>	<u>\$</u>	<u>League of Cities</u>
<u> / / </u>	<u>\$</u>	<u>Conference - Kindle</u>

► NAME OF SOURCE (Not an Acronym)
 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$</u>	
<u> / / </u>	<u>\$</u>	
<u> / / </u>	<u>\$</u>	

► NAME OF SOURCE (Not an Acronym)
 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$</u>	
<u> / / </u>	<u>\$</u>	
<u> / / </u>	<u>\$</u>	

► NAME OF SOURCE (Not an Acronym)
 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$</u>	
<u> / / </u>	<u>\$</u>	
<u> / / </u>	<u>\$</u>	

► NAME OF SOURCE (Not an Acronym)
 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$</u>	
<u> / / </u>	<u>\$</u>	
<u> / / </u>	<u>\$</u>	

► NAME OF SOURCE (Not an Acronym)
 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> / / </u>	<u>\$</u>	
<u> / / </u>	<u>\$</u>	
<u> / / </u>	<u>\$</u>	

Comments: _____

SCHEDULE E
Income – Gifts
Travel Payments, Advances,
and Reimbursements

CALIFORNIA FORM 700 <small>FAIR POLITICAL PRACTICES COMMISSION</small>
Name <u>Laura Friedman</u>

- You must mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. These payments are not subject to the \$440 gift limit, but may result in a disqualifying conflict of interest.

<p>▶ NAME OF SOURCE (Not an Acronym) <u>Tsinghua University / Chinese Government</u></p> <p>ADDRESS (Business Address Acceptable) _____ _____ _____ CITY AND STATE <u>Beijing, China</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <input checked="" type="checkbox"/> 501 (c)(3) <u>Agency of Chinese Government</u></p> <p>DATE(S): <u>2 / 22 / 12</u> - <u>2 / 29 / 12</u> AMT: \$ <u>6,800</u> (If gift)</p> <p>TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income</p> <p><input checked="" type="checkbox"/> Made a Speech/Participated in a Panel <input checked="" type="checkbox"/> Other - Provide Description <u>Travel expenses & lodging to explore sister-city relationships with Chinese cities and economic cooperation between Glendale & Chinese cities</u></p>	<p>▶ NAME OF SOURCE (Not an Acronym) <u>City of Pohang</u></p> <p>ADDRESS (Business Address Acceptable) _____ _____ _____ CITY AND STATE <u>Pohang, South Korea</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <input checked="" type="checkbox"/> 501 (c)(3) <u>Glendale Friendship City</u></p> <p>DATE(S): <u>4 / 2 / 12</u> - <u>4 / 3 / 12</u> AMT: \$ <u>175</u> (If gift)</p> <p>TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income</p> <p><input checked="" type="checkbox"/> Made a Speech/Participated in a Panel <input checked="" type="checkbox"/> Other - Provide Description <u>Food & lodging in Pohang, a City of Glendale "friendship" City.</u></p>
<p>▶ NAME OF SOURCE (Not an Acronym) <u>City of Goseong</u></p> <p>ADDRESS (Business Address Acceptable) _____ _____ _____ CITY AND STATE <u>Goseong, South Korea</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <input checked="" type="checkbox"/> 501 (c)(3) <u>Korean City - Sister City of Glendale</u></p> <p>DATE(S): <u>3 / 29 / 12</u> - <u>4 / 8 / 12</u> AMT: \$ <u>1,675</u> (If gift)</p> <p>TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income</p> <p><input checked="" type="checkbox"/> Made a Speech/Participated in a Panel <input checked="" type="checkbox"/> Other - Provide Description <u>Travel & Expenses to Korean Sister City to attend Goseong Dinosaur Expo and further sister city relationship</u></p>	<p>▶ NAME OF SOURCE (Not an Acronym) <u>City of Gimpo</u></p> <p>ADDRESS (Business Address Acceptable) _____ _____ _____ CITY AND STATE <u>Gimpo, South Korea</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <input checked="" type="checkbox"/> 501 (c)(3) <u>City of Glendale Sister City</u></p> <p>DATE(S): <u>4 / 4 / 12</u> - <u>4 / 6 / 12</u> AMT: \$ <u>350</u> (If gift)</p> <p>TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income</p> <p><input checked="" type="checkbox"/> Made a Speech/Participated in a Panel <input checked="" type="checkbox"/> Other - Provide Description _____</p>

Comments: _____

SCHEDULE E
Income – Gifts
Travel Payments, Advances,
and Reimbursements

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name Laura Friedman

- You must mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. These payments are not subject to the \$440 gift limit, but may result in a disqualifying conflict of interest.

▶ NAME OF SOURCE (Not an Acronym)
City of Boeun-gun
ADDRESS (Business Address Acceptable)

CITY AND STATE
Boeung-gun, South Korea
BUSINESS ACTIVITY, IF ANY, OF SOURCE ☒ 501 (c)(3)
Korean City - City of Glendale Friendship City
DATE(S): 4 / 7 / 12 - 4 / 8 / 12 AMT: \$ 175
(If gift)
TYPE OF PAYMENT: (must check one) ☒ Gift ☐ Income
☒ Made a Speech/Participated in a Panel
☒ Other - Provide Description
Food & lodging in Boeun-gun, a City of Glendale
"friendship" City

▶ NAME OF SOURCE (Not an Acronym)
Chinese People's Assoc for Friendship with Foreign
ADDRESS (Business Address Acceptable)
Countries
CITY AND STATE
Beijing, China
BUSINESS ACTIVITY, IF ANY, OF SOURCE ☒ 501 (c)(3)
Agency of the Chinese Government
DATE(S): 6 / 15 / 12 - 6 / 24 / 12 AMT: \$ 5,600
(If gift)
TYPE OF PAYMENT: (must check one) ☒ Gift ☐ Income
☒ Made a Speech/Participated in a Panel
☒ Other - Provide Description
Travel food & lodging to US/China Forum on Economic
Development, Cooperation & Investment

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE ☐ 501 (c)(3)

DATE(S): ____ / ____ / ____ - ____ / ____ / ____ AMT: \$ ____
(If gift)
TYPE OF PAYMENT: (must check one) ☐ Gift ☐ Income
☐ Made a Speech/Participated in a Panel
☐ Other - Provide Description

▶ NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

CITY AND STATE

BUSINESS ACTIVITY, IF ANY, OF SOURCE ☐ 501 (c)(3)

DATE(S): ____ / ____ / ____ - ____ / ____ / ____ AMT: \$ ____
(If gift)
TYPE OF PAYMENT: (must check one) ☐ Gift ☐ Income
☐ Made a Speech/Participated in a Panel
☐ Other - Provide Description

Comments: _____